

Substitute for Form 1449/PTO		<i>Complete if Known</i>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>		<b>Application Number</b>	10/052,111
		<b>Filing Date</b>	January 17, 2002
		<b>First Named Inventor</b>	Joseph A. Schrader
		<b>Art Unit</b>	2623
		<b>Examiner Name</b>	Shang, Annan Q.
Sheet	1	of	1
		<b>Attorney Docket Number</b>	164052.04

Examiner Signature	Date Considered
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\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional) <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached